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Promoting and protecting the health of the public and the environment.

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June 28, 2005

MEMORANDUM

To: Administrators of Hospitals and Institutional General Infirmaries
Administrators of Nursing Homes
Administrators of Community Residential Care Facilities
Administrators of Intermediate Care Facilities for the Mental Retarded
Administrators of Residential Treatment Centers for Children & Adolescents
Administrators of Inpatient Hospice Facilities
Administrators of Inpatient Facilities that Treat Individuals for
Psychoactive Substance Abuse or Dependence

From: Dennis L. Gibbs, Director
Division of Health Licensing

RE: Emergency/Disaster Preparedness

The Department's August 30, 2004 Emergency Order issued by C. Earl Hunter, Commissioner of the South Carolina Department of Health and Environmental Control, requires that, "...each facility shall certify to DHEC no later than June 1 of each year that the Emergency Evacuation Plan contains a Sheltering Plan, Transportation Plan, and Staffing Plan complying with the terms of this Order, and shall submit to DHEC the name(s) of the Sheltering Facility (Facilities)..." Additionally, by Memorandum dated May 6, 2005 (see <http://www.scdhec.gov/hr/pdfs/licen/licgen/hlevacmemo050605.pdf>), I reminded each inpatient facility licensed by DHEC that it must comply with this component of the Emergency Order by submitting a notarized statement signed by the administrator or appropriate officer. This memorandum specified that this required statement and the name(s) of the Sheltering Facility (Facilities) must be submitted to the Division of Health Licensing by no later than June 1, 2005. A sample Affidavit is on the back of this Memorandum for your possible use.

Division records indicate that the above stated information has not been received from your facility. Failure of this facility to **immediately** submit this required information to the following address may result in the Department initiating an enforcement action against this facility:

Division of Health Licensing
S.C. Department of Health and Environmental Control
2600 Bull Street
Columbia, S.C. 29201

Should you have any questions, please call Randy Clark (E-mail: clarkro@dhec.sc.gov) or Shelton Elliott (E-mail: elliotsm@dhec.sc.gov) or me at (803) 545-4370.

DLG:eb:

Affidavit of Compliance with August 30, 2004 Emergency Order

Compliance with the requirements of the August 30, 2004 Emergency Order of the South Carolina Department of Health and Environmental Control (DHEC); by my signature, I certify that the Emergency Evacuation Plan of:

Facility Name: _____

contains a Sheltering Plan, Transportation Plan, and Staffing Plan. Additionally, as required by the DHEC August 30, 2004 Emergency Order, please find listed below the names of the sheltering facility(ies) the above-named facility will utilize in the event that residents of this facility have to be relocated due to an emergency.

1.

Name of Sheltering Facility

Address of Sheltering Facility

Name of Contact and Emergency Telephone Number of Sheltering Facility

2.

Name of Sheltering Facility

Address of Sheltering Facility

Name of Contact and Emergency Telephone Number of Sheltering Facility

3.

Name of Sheltering Facility

Address of Sheltering Facility

Name of Contact and Emergency Telephone Number of Sheltering Facility

4.

Name of Sheltering Facility

Address of Sheltering Facility

Name of Contact and Emergency Telephone Number of Sheltering Facility

I certify that the above-stated information is a true and accurate statement of compliance with the requirements of the South Carolina Department of Health and Environmental Control's Emergency Order of August 30, 2004.

Administrator, Name of Facility

SWORN To before me this _____ Day of _____, 2005

Notary Public for South Carolina

My commission Expires: _____.